

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

Relevant financial activities outside the submitted work.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

Relationships not covered above.

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Royalties: Funds are coming in to you or your institution due to your patent

Kim 1



Section 1.	Identifying Inform	ation		
1. Given Name (First Name) Dae Won		2. Surname (Last Name) Kim		3. Date 24-July-2018
4. Are you the corresponding author?		☐ Yes ✓ No	Corresponding Author's Name Sara Hoffe	
5. Manuscript Title Radiation induced antitumor autoimmunity: immunotherapies ar		nd pancreatic adenocarcinor	ma	
6. Manuscript Iden APC-18-11	itifying Number (if you kn	ow it)		
Section 2.	The Work Under Co	onsideration for Public	cation	
any aspect of the su statistical analysis, e	ubmitted work (including	but not limited to grants, da	a third party (government, con ta monitoring board, study des	nmercial, private foundation, etc.) for sign, manuscript preparation,
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of compensation) clicking the "Add) with entities as descri	bed in the instructions. Use port relationships that wer	se one line for each entity; ac	ntionships (regardless of amount dd as many lines as you need by onths prior to publication.
Section 4.				
Section 4.	Intellectual Proper	ty Patents & Copyric	ghts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Kim 2



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Section 6. Disclosure Statement			
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.			
Dr. Kim has nothing to disclose.			

Evaluation and Feedback

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Song 1



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1. Given Name (First Name) Ethan	2. Surname (Last Name) Song	3. Date 24-July-2018		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Sarah Hoffe		
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Section 3. Polovant financial	activities outside the s	upmitted work		
Place a check in the appropriate boxes of compensation) with entities as descr	in the table to indicate wh ribed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.		
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